## **PeggyAnn Milton, McLean County Clerk** Government Center

Government Center 115 East Washington Street, Room 102 PO Box 2400

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	Application for Consumer Fireworks Display
(1)	Name, address, phone number(s) of person or entity sponsoring display:
(2)	Exact location of display:
	2. Auct rocation of display.
(3)	Exact date and time of display:
(4)	Name, address, phone number(s) for the Consumer Operator handling the display:
	Please attach the following <u>REQUIRED</u> documents:
	A current and valid copy of written proof of training from a consumer fireworks training class approved by the Office of the State Fire Marshall
	A Certificate of Insurance from an insurance company licensed to do business in Illinois evidencing a minimum of \$100,000 per occurrence for bodily injury and property damage
	A written approval letter or permit issued by the Fire Chief providing fire protection coverage to the area of the display
	A fee in the amount of \$45.00
	A copy of applicant's valid drivers license or State issued ID for use in criminal background check
——— Date	Applicant
Your A	Address and Phone Number: